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				Application Number			
INF	ORMATION	DI	SCLOSURE	Filing Date	3/18/2004		
STA	ATEMENT B	Y	APPLICANT	First Named Inventor	Scott Goldthwaite		
				Group Art Unit			
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Sheet	1	of	1	Attorney Docket Number	WS-105		

U.S. PATENT DOCUMENTS									
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/KF/		6,292,561		Benson, Keith	9/18/2001				
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Substitu	10 10 10 11 144 5/F 10			Application Number			
INF	ORMATION	DIS	CLOSURE	Filing Date	3/18/2004		
STA	TEMENT E	BY A	PPLICANT	First Named Inventor	Scott Goldthwaite		
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